engaging, suspending, and discharging the domestic servants."

The nurses are, we presume, engaged, suspended, and discharged by the house surgeon! It would be interesting to know how long this gentleman holds office. Do the nurses have a new superintendent every six months? This and other questions must be answered before the Macclesfield Infirmary can rank as a training school for nurses, or take any position in the nursing world, and under the proposed organisation we should advise ladies desiring to be trained as nurses to give it a wide berth. We cannot believe that any lady who is a trained nurse will consent to remain in, or to accept, the office of matron in this institution under the present regulations. We feel sure that the wisest course for the matron to adopt would be to protest to the committee, and if the new rules are not at once rescinded to resign, stating publicly her reasons for doing so. There can be no doubt that she would receive the support and the esteem of all. her colleagues if she took this step. It is almost inconceivable that at the end of the nineteenth century a body of men can be found so devoid of common sense as the Governors of the Macclesfield Infirmary.

MORE ABOUT MIDWIVES.

IN view of the differences of opinion which now exist as to what constitutes an efficient mental or monthly nurse, the report of the lying-in wards of the Liverpool Workhouse Hospital by Dr. William Alexander, recently published in the Lancet, is of considerable interest. Dr. Alexander states that the 'nurses of this institution are trained for three years, three months of which are devoted to obstetric work, during which time they see fifty or sixty labours. He also says, most truly, that nurses who have had two years and nine months medical and surgical work are "far more susceptible of obstetric training than the widows and other lone women, who have been crushed out somehow into the cold and have taken to lying-in work as a means of livelihood."

He adds, "at one time we trained a few of these, but the response to the training on their part was very faint, and when their three months had elapsed they were just beginning to have a glimmering of the meaning of our teaching.

Just as dentists have some training in common with medical men, I think obstetric nurses and midwives should have a training in general nursing, as they will then not only be more efficient midwives, but will have a choice of kinds of nursing from which to select, according to their inclinations and opportunities." Dr. Alexander is also of opinion that "while the lying-in wards of the workhouse hospital could not get on safely for long without the medical staff, the medical staff would soon get into difficulties without the midwife and her staff. The one is the complement of the other."

Dr. Alexander advocates the employment of midwives amongst the poor, for reasons which are frank if startling. "Medical men will occupy a more manly and dignified position in regard to labours amongst the poor, than by the drudgery necessitated by personally attending badly paid confinements, where the wear and tear, anxiety and exposure, often lead to premature old age."

The midwives, then, are welcome to all the badly paid work, and may put up with the anxiety and exposure. This appears to be usually the position which is assigned to womankind in the labour market, but the second reason advanced is more surprising.

"The necessity of quickly terminating a case sometimes leads to dangerous or fatal measures being adopted that the patience and leisure of the midwife would avoid."

This is naïve, but what would be said if a midwife were to bring such an exceedingly grave charge against medical men? It can hardly be supposed that the necessity for speedily getting over a case often prompts a medical man to adopt "dangerous or fatal measures!"

A stronger argument, or one which would weigh more with the public of all classes, could scarcely be advanced in favour of the claims of midwives.

Legal Matters.

THE REGISTRATION OF MIDWIVES.

THE question of the Registration of Midwives is still prominently before the public, and much pressure is being brought to bear upon members of the House of Commons, both by those in favour of, and those opposed to, the Bill for the Registration of Midwives at present before the House.

A public meeting in support of the Bill will be held at London House, 32, St. James' Square, on Thursday, March 18th, at 3 p.m., at which Mrs. Creighton will preside.

We have previously expressed our views upon this Bill in the NURSING RECORD, and can only reiterate our conviction that the Bill, should it become law, will not further the best interests of those for whose protection it is framed.

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